



Jefferson Recreation Center Customer Information for Semester Pass

This document includes household information in order to set up the semester pass for your students.

Office Use Only Customer ID# _____ Staff Init. _____

Parent/Guardian Information

Last Name	First Name	M.I.	Date of Birth	Male / Female
Street Address	City	State	Zip Code	
Home Phone	Work or Cell Phone	Emergency Contact Phone		

Email address _____

Family Member Information

Children				
Last Name	First Name	M.I.	Date of Birth	Male / Female
Last Name	First Name	M.I.	Date of Birth	Male / Female
Last Name	First Name	M.I.	Date of Birth	Male / Female
Last Name	First Name	M.I.	Date of Birth	Male / Female
Last Name	First Name	M.I.	Date of Birth	Male / Female
Last Name	First Name	M.I.	Date of Birth	Male / Female

WAIVER: As a participant, or parent or guardian of a participant, permission is granted to participate in the Mesa Parks and Recreation program. Participants understand and agree that they may be photographed and/or videotaped for the promotion of City of Mesa programs. I understand that there are risks of physical injury to the participant(s). Considering all possible risks, on behalf of the participant(s) and myself, I voluntarily waive, release, discharge, and hold harmless the City of Mesa, its employees, supervisors, appointed officials, agents, representatives and volunteers from all claims for all injuries to participant(s), no matter how severe. Furthermore, I give consent for emergency medical treatment to the participant(s). This waiver does not extend to any such claim or liability that is caused solely and exclusively by the gross negligence of the City of Mesa or its employees, supervisors, appointed officials, agents, representatives and volunteers.

Parent/Guardian Signature

Date